

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008828

FILED
Apr 29, 2005
Secretary of State

Entity Name: MIAMI RAIDERS BASEBALL CLUB, INC.

Current Principal Place of Business:

7800 RED ROAD
SUITE 218
SOUTH MIAMI, FL 33143

Current Mailing Address:

7800 RED ROAD
SUITE 218
SOUTH MIAMI, FL 33143

New Principal Place of Business:

7600 RED ROAD
SUITE 300
SOUTH MIAMI, FL 33143

New Mailing Address:

7600 RED ROAD
SUITE 300
SOUTH MIAMI, FL 33143

FEI Number: 02-0652034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFANO, THOMAS D
7800 RED ROAD
SUITE 127
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AMEDIA, FRANK
Address: 7800 RED ROAD, SUITE 218
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D () Delete
Name: AMEDIA, LORILEE
Address: 7800 RED ROAD, SUITE 218
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D () Delete
Name: ALFANO, THOMAS D
Address: 7800 RED ROAD, STE 127
City-St-Zip: SOUTH MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AMEDIA, FRANK
Address: 7600 RED ROAD, SUITE 300
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D (X) Change () Addition
Name: AMEDIA, LORILEE
Address: 7600 RED ROAD, SUITE 300
City-St-Zip: SOUTH MIAMI, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS D ALFANO

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date